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News (continued from p402)

Around 100,000 staff in the Departments of Health and Social Security received **organ donor cards** with their August pay slips. Ministers and Senior Officials hope that a significant number of staff in both Departments will discuss this issue with their families and will decide to sign the card and carry it with them at all times.

Individuals and organisations can get donor cards by telephoning a Freeline telephone number: 0800 444 136.

The relationship between **breast feeding** and **fertility** was reviewed by the panel of medical advisers to the International Planned Parenthood Federation when they met in London last year to discuss contraception issues. In information subsequently issued as guidance for the federation and its member associations in 123 countries, the medical professionals emphasised the importance of breast feeding to infant health — for protection against infection, mother-child bonding and as a temporary contraceptive measure to prolong birth intervals. However, the panel warned that urbanisation and changes in lifestyle were contributing to alterations in breast-feeding patterns worldwide and increasing the risk of unwanted pregnancy while another was still nursing her newborn child.

Health workers were alerted to variations in the length of breast feeding and postpartum amenorrhoea and the duration of lactational infertility among different populations, as well as socially and geographically within countries. Studies from many parts of the world had shown a positive correlation between the duration of breast feeding and the length of lactational amenorrhoea, while in women who did not breast feed menses could occur as early as 35 or 40 days after delivery. However, inhibition of ovarian activity was dependent on the frequency and distribution of nursing episodes day and night and the time the baby spent suckling. Amenorrhoea lasted longer in women who breast fed more frequently, for a longer time, and who maintained suckling at night as well as during the day.

Women relying on lactational infertility alone to prevent pregnancy should be informed the chance of conception increased with the first postpartum menses and introduction of supplementary milk or food to the infant. Alternative contraceptive measures should be recommended as soon as any of these factors was present, or earlier if local experience suggested this might be necessary.

Health workers were advised that because of the value of breast feeding to the child, it should never be discounted in order to start a more reliable method of contraception; an appropriate method should be chosen which would not interfere with breast feeding.

The doctors advised against use of combined oral contraceptives during the first six months after delivery or until the infant was weaned, whichever was earlier; progestagen-only oral contraceptives do not have the same adverse effects on milk supply as the combined Pill. The specialists noted that there was no evidence that the injectable hormonal contraceptives DMPA and NET-EN adversely affected milk production or duration of lactation. The question of possible consequences of steroid transfer to the breast-fed infant had yet to be resolved.

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